2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000043411

1. Entity Name
VALLERY INVESTMENT PROPERTIES, LLC

Principal Place of Business	Mailing Address
300 EAST HIGHWAY 50	300 EAST HIGHWAY 50
CLERMONT, FL 34711	CLERMONT, FL 34711

DO NOT WRITE IN THIS SPACE

FILED

2007 APR 11 PM 11: 35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03302007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
20-3144445	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

VALLERY, MARK G
300 EAST HIGHWAY 50
CLERMONT, FL 34711

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2007

000102626730
05/16/07--01002--026   **50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	MARK VALLERY OF THE VALLERY FAMILY REVOCAB
STREET ADDRESS	300 EAST HIGHWAY 50
CITY-ST-ZIP	CLERMONT, FL 34711
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____ mm   4/6/07   352 394-0614
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #